

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Mundo Latino Market Inc.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 46-4638980

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

1272-1278 St. Nicholas Avenue
New York, NY 10033
Number, Street, City, State & ZIP Code

New York
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business
590 West 174th Street, a/k/a 1272-1278 St.
Nicholas Avenue New York, NY 10033
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 11, 2016**
MM / DD / YYYY

X /s/ Kathryn N. Holler
Signature of authorized representative of debtor

Title **president**

Kathryn N. Holler
Printed name

18. Signature of attorney

X /s/ Alla Kachan
Signature of attorney for debtor

Date **May 11, 2016**
MM / DD / YYYY

Alla Kachan
Printed name

Law Offices Of Alla Kachan, P.C.
Firm name

3099 Coney Island Avenue
3rd Floor
Brooklyn, NY 11235
Number, Street, City, State & ZIP Code

Contact phone **(718) 513-3145**

Email address **alla@kachanlaw.com**

4244281
Bar number and State

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 11, 2016

X /s/ Kathryn N. Holler

Signature of individual signing on behalf of debtor

Kathryn N. Holler

Printed name

president

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Mundo Latino Market Inc.**
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express P.O. Box 1270 Newark, NJ 07101		Plum card				\$18,274.59
Ascentium Capital LLC PO Box 301593 Dallas, TX 75303		POS system scales, software (9 CAS Scales CL5000, Invontron Software, 9 SQL NODE License, LOC Module Scale Link)	Disputed	\$25,900.00	\$12,000.00	\$25,900.00
CAN CAPITAL 2015 Vaughn Road, Building 500 Kennesaw, GA 30144		Loan	Disputed			\$91,702.34
Constellation New Energy, Inc. 14217 Collections Centre Dr. Chicago, IL 60693		Refrigeration System and Walk-in Coolers		\$291,031.58	\$150,000.00	\$141,031.58
Constellation NwEnergy, Inc. 14217 Collections Center Dr. Chicago, IL 60693		Utility Service Charge				\$70,142.25
Giovanni RODRIGUEZ 8200 Boulevard East, Apt. 17-K North Bergen, NJ 07047		Loan				\$21,000.00
GOYA FOODS, INC. 100 Seaview Drive Secaucus, NJ 07096		Vendor	Disputed			\$34,350.05

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
GURU NETWORKS 6 N. Pearl Street, Suite 304C Port Chester, NY 10573		Vendor	Disputed			\$47,030.63
JJCR ENTERPRISES LLC 17 Grand Avenue River Edge, NJ 07661		Services	Disputed			\$62,000.00
JPMorgan Chase Bank, N.A. PO Box 659754 San Antonio, TX 78265-9754		Overdraft checking account	Disputed			\$89,908.46
Juan BAEZ 185 Audubon Avenue Apt. 25 New York, NY 10033		Payroll				\$12,470.00
Lawrence Mitchell 229 West 60th Street New York, NY 10023		Promissory note	Disputed			\$42,000.00
MELBA UTICA PACKING CO. INC. 1209 Utica Avenue Brooklyn, NY 11203		Vendor	Disputed			\$52,611.46
Norman KELLER 166 Bank Street, Apt. 4B New York, NY 10014		Promissory note	Disputed			\$32,500.00
PLATZER, SWERGOLD, LEVINE, GOL 475 Park Avenue South, 18th Fl New York, NY 10016		Services	Disputed			\$26,966.07
RIGS MANAGEMENT CO., LLC 42 Bayview Avenue PO BOX 4200 Manhasset, NY 11030		Landlord	Disputed			\$113,000.00
SUPERMARKET NEEDS CORP D/B/A Huguenot Sales Co. 1135 Southern Blvd Bronx, NY 10459		Vendor	Disputed			\$15,612.15

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
TROPICAL EXPRESS, INC. 529 Hunts Point Avenue Bronx, NY 10474		Vendor	Disputed			\$47,899.00
TROPICAL SOURCING LLC 9 Crossbrook Place Livingston, NJ 07039		Vendor	Disputed			\$20,000.00
WEST SIDE FOODS 355 Food Center Drive Bronx, NY 10474		Vendor	Disputed			\$49,205.45

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ <u>297,997.32</u>
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ <u>297,997.32</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>316,931.58</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>1,031,589.97</u>
4. Total liabilities	
Lines 2 + 3a + 3b	\$ <u>1,348,521.55</u>

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$50.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

	Chase Bank			
	Restrained account by West Side			
3.1.	Foods Inc.	Checking	3606	\$80.98

	Chase Bank			
	Restrained account by West Side			
3.2.	Foods Inc.	Checking	0266	\$0.00

	Chase Bank			
	Restrained account by West Side			
3.3.	Foods Inc.	Savings	3136	\$0.59

	Chase Bank			
	Restrained account by West Side			
3.4.	Foods Inc.	Checking	3312	\$6,511.13

	Neighborhood Trust Federal Credit			
	Union			
3.5.		Checking and Savings	3924	\$118.42

4. Other cash equivalents (Identify all)

Debtor Mundo Latino Market Inc. Case number (If known) _____
Name

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$6,761.12

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. **ConEdison, Utility Deposit**

\$3,236.20

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

8.1. **Rigs Management Co., LLC/ D/B/A Milbrook Properties, LTD
Landlord**

\$96,000.00

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$99,236.20

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Merchandise inventory		\$0.00		\$5,000.00

Debtor Mundo Latino Market Inc. Case number (If known) _____
Name

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$5,000.00

24. **Is any of the property listed in Part 5 perishable?**

- ☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Office furniture	\$0.00		\$500.00

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$500.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

Debtor Mundo Latino Market Inc. Case number (If known) _____
Name

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) POS system scales, software (9 CAS Scales CL5000, Invontron Software, 9 SQL NODE License, LOC Module Scale Link)	\$0.00		\$12,000.00
Refrigeration System and Walk-in Coolers	\$0.00		\$150,000.00
Lighting	\$0.00		\$2,500.00
Security Gates	\$0.00		\$3,000.00
Produce Stands	\$0.00		\$3,000.00
Produce Tables	\$0.00		\$1,000.00
Cash Register Tables	\$0.00		\$2,500.00
Conveyor belts	\$0.00		\$5,000.00
Butcher Equipment	\$0.00		\$7,500.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$186,500.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Debtor Mundo Latino Market Inc. Case number (If known) _____
Name

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites <u>mundolatinomarket.com</u>	<u>\$0.00</u>		<u>\$0.00</u>

62. Licenses, franchises, and royalties
63. Customer lists, mailing lists, or other compilations
64. Other intangibles, or intellectual property
65. Goodwill

66. Total of Part 10. \$0.00
Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor Mundo Latino Market Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$6,761.12	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$99,236.20	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$5,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$500.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$186,500.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$297,997.32	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$297,997.32

Fill in this information to identify the case:

Debtor name **Mundo Latino Market Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Ascentium Capital LLC <small>Creditor's Name</small> PO Box 301593 Dallas, TX 75303 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 9375 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien POS system scales, software (9 CAS Scales CL5000, Invontron Software, 9 SQL NODE License, LOC Module Scale Link) Describe the lien Equipment Finance Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$25,900.00	\$12,000.00

2.2	Constellation New Energy, Inc. <small>Creditor's Name</small> 14217 Collections Centre Dr. Chicago, IL 60693 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Refrigeration System and Walk-in Coolers Describe the lien Equipment Finance Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$291,031.58	\$150,000.00
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Debtor **Mundo Latino Market Inc.**

Name

Case number (if know)

☒ No

☐ Contingent

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$316,931.58

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Fill in this information to identify the case:

Debtor name **Mundo Latino Market Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address 458 1/2 SOUTH BROADWAY MEAT INC. 458 1/2 S Broadway Yonkers, NY 10705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$280.00
3.2	Nonpriority creditor's name and mailing address A&A DISTRIBUTORS 717 Pennsylvania Ave Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$206.80
3.3	Nonpriority creditor's name and mailing address AMERICAN EXPRESS PO Box 1270 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number <u>1003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Business Platinum Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.4	Nonpriority creditor's name and mailing address American Express P.O. Box 1270 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Plum card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,274.59

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

3.5	<p>Nonpriority creditor's name and mailing address BEHALF Ra'anana, HaHaroshet St 25 Israel</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Loan</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,100.00
3.6	<p>Nonpriority creditor's name and mailing address BEST SNACKS CORP 100-06 93rd Avenue Richmond Hill, NY 11418</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$703.00
3.7	<p>Nonpriority creditor's name and mailing address BIMBO FOODS, INC. 255 Business Center Dr Horsham, PA 19044</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$157.16
3.8	<p>Nonpriority creditor's name and mailing address BROADVIEW NETWORKS 800 Westchester Ave. Port Chester, NY 10573</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>AACL</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Phone services</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,810.18
3.9	<p>Nonpriority creditor's name and mailing address C&C SIGNS 1275 Edward L. Grant Hwy Bronx, NY 10452</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,863.75
3.10	<p>Nonpriority creditor's name and mailing address Camerino ALMONTE 1011 Sheridan Avenue, Apt.5-A Bronx, NY 10456</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$530.00
3.11	<p>Nonpriority creditor's name and mailing address CAN CAPITAL 2015 Vaughn Road, Building 500 Kennesaw, GA 30144</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Loan</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$91,702.34

Debtor	Mundo Latino Market Inc. <small>Name</small>	Case number (if known) _____
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3.12	Nonpriority creditor's name and mailing address Carolyn COAKLEY 6043 19 Mile Road Sterling Heights, MI 48314 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,050.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address CASH REGISTER SYSTEMS INC 2906 RT 130 North Riverside, NJ 08075 Date(s) debt was incurred <u>3098</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,829.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Contract maintenance</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address CASHLINE ATM 41 Gold Street Valley Stream, NY 11580 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Promissory note</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address Cibao Meat Products Inc. 630 St Ann's Ave Bronx, NY 10455 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$82.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address Cintas PO Box 1474 Culpeper, VA 22701 Date(s) debt was incurred _____ Last 4 digits of account number <u>790</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,334.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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3.17	Nonpriority creditor's name and mailing address Conchita Foods, Inc. 10051 Nw 99th Avenue # 3 Miami, FL 33178 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$773.33 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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3.18	Nonpriority creditor's name and mailing address Constellation NwEnergy, Inc. 14217 Collections Center Dr. Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number <u>OFFN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$70,142.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Service Charge</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Mundo Latino Market Inc. <small>Name</small>	Case number (if known) _____
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3.19	Nonpriority creditor's name and mailing address Cosmo Provision Co, Inc. 12 Theresa Ln Harrison, NY 10528 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$762.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	Nonpriority creditor's name and mailing address D'Bois Ice Cream 26423 Grand Central Parkway Little Neck, NY 11362 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	Nonpriority creditor's name and mailing address Diaz Foods c/o Allen Maxwell & Silver Inc 190 Sylvan Avenue Englewood Cliffs, NJ 07632 Date(s) debt was incurred ____ Last 4 digits of account number <u>2744</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,892.24 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	Nonpriority creditor's name and mailing address EDDIE PAGAN/EP Security System 35 Hillside Ave New York, NY 10040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address EL FARO BAKERY, INC. 3124 FULTON ST. Brooklyn, NY 11233 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$136.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address EL PANADERO 1380 St Nicholas Ave New York, NY 10033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$330.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	Nonpriority creditor's name and mailing address EUROPEAN BEAUTY CONCEPTS 143 Woodworth Ave. Yonkers, NY 10701 Date(s) debt was incurred ____ Last 4 digits of account number <u>0046</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$102.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

3.26	Nonpriority creditor's name and mailing address F&J MASTER SALES 940 E 149th Street Bronx, NY 10455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.27	Nonpriority creditor's name and mailing address FARMLAND FRESH DAIRIES, LLC 105-03 150TH Street Jamaica, NY 11435 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,800.00
3.28	Nonpriority creditor's name and mailing address FelixTaveras 559 West 172nd Street New York, NY 10032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,320.00
3.29	Nonpriority creditor's name and mailing address FERNANDO SANTOS Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.00
3.30	Nonpriority creditor's name and mailing address FERNANDO'S BAKERY 5 Sherman St Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.00
3.31	Nonpriority creditor's name and mailing address G Consulting 6 Transverse Road Garden City, NY 11530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$273.60
3.32	Nonpriority creditor's name and mailing address GENERAL TRADING CO., INC 455 18th Street Carlstadt, NJ 07072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,376.99

Debtor **Mundo Latino Market Inc.**
Name

Case number (if known)

3.33	Nonpriority creditor's name and mailing address Giovanni RODRIGUEZ 8200 Boulevard East, Apt. 17-K North Bergen, NJ 07047 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,000.00
3.34	Nonpriority creditor's name and mailing address Glennys MORALES 191 Audubon Avenue Apt. 3B New York, NY 10033 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$560.00
3.35	Nonpriority creditor's name and mailing address GOYA FOODS, INC. 100 Seaview Drive Secaucus, NJ 07096 Date(s) debt was incurred _____ Last 4 digits of account number <u>5841</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,350.05
3.36	Nonpriority creditor's name and mailing address GRACEKENNEDY FOODS (USA) LLC – 230 Moonachie Avenue Moonachie, NJ 07074 Date(s) debt was incurred _____ Last 4 digits of account number <u>6143</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,446.63
3.37	Nonpriority creditor's name and mailing address GURU NETWORKS 6 N. Pearl Street, Suite 304C Port Chester, NY 10573 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,030.63
3.38	Nonpriority creditor's name and mailing address IMPERIAL BAG & PAPER CO 255 Route 1 & 9 Jersey City, NJ 07306 Date(s) debt was incurred _____ Last 4 digits of account number <u>N098</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,307.49
3.39	Nonpriority creditor's name and mailing address Ink from Chase PO Box 15123 Wilmington, DE 19850 Date(s) debt was incurred _____ Last 4 digits of account number <u>1676</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,119.11

Debtor	Mundo Latino Market Inc. <small>Name</small>	Case number (if known) _____
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3.40	Nonpriority creditor's name and mailing address IOS NATURALS, LLC 4 Hickory Road West Orange, NJ 07052 Date(s) debt was incurred _____ Last 4 digits of account number <u>9626</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$791.40
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3.41	Nonpriority creditor's name and mailing address J ESPOSITO & SONS 1328 39th St Brooklyn, NY 11218 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,361.00
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3.42	Nonpriority creditor's name and mailing address J&J FARMS CREAMERY CO.,INC 57-48 49th Place Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,153.70
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3.43	Nonpriority creditor's name and mailing address JACK'S EGGS 130 44th St Brooklyn, NY 11232 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,874.93
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3.44	Nonpriority creditor's name and mailing address JANOVER LLC 100 Quentin Roosevelt Blvd. Suite 516 Garden City, NY 11530 Date(s) debt was incurred _____ Last 4 digits of account number <u>1000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,976.50
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3.45	Nonpriority creditor's name and mailing address JEFFREY PEREZ 172 Sherman Avenue Apt. 36 New York, NY 10034 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
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3.46	Nonpriority creditor's name and mailing address Jeffrey PEREZ 172 Sherman Avenue Apt. 36 New York, NY 10034 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,724.29
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Debtor **Mundo Latino Market Inc.**
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3.47	Nonpriority creditor's name and mailing address JJCR ENTERPRISES LLC 17 Grand Avenue River Edge, NJ 07661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,000.00
3.48	Nonpriority creditor's name and mailing address Jose Sanchez West 590 W. 174 Street, Apt.# New York, NY 10033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$997.00
3.49	Nonpriority creditor's name and mailing address Josephina BAEZ DE VALDEZ Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.00
3.50	Nonpriority creditor's name and mailing address JPMorgan Chase Bank, N.A. PO Box 659754 San Antonio, TX 78265 Date(s) debt was incurred ____ Last 4 digits of account number <u>3606</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Overdraft checking account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$411.04
3.51	Nonpriority creditor's name and mailing address JPMorgan Chase Bank, N.A. PO Box 659754 San Antonio, TX 78265-9754 Date(s) debt was incurred ____ Last 4 digits of account number <u>3312</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Overdraft checking account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89,908.46
3.52	Nonpriority creditor's name and mailing address Juan BAEZ 185 Audubon Avenue Apt. 25 New York, NY 10033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,470.00
3.53	Nonpriority creditor's name and mailing address Juan BURGOS 274 W 140 St Apt. 46 New York, NY 10030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00

Debtor **Mundo Latino Market Inc.**
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3.54	Nonpriority creditor's name and mailing address Juan ROJAS 503 West 169th Street Apt.42 New York, NY 10032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,036.00
3.55	Nonpriority creditor's name and mailing address KATZMAN PRODUCE 153-157 NYC Terminal Market Bronx, NY 10474 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,903.70
3.56	Nonpriority creditor's name and mailing address LATIN AMERICAN DISTRIBUTORS IN 307 Industrial Way W Eatontown, NJ 07799 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$663.50
3.57	Nonpriority creditor's name and mailing address Lawrence Mitchell 229 West 60th Street New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Promissory note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,000.00
3.58	Nonpriority creditor's name and mailing address Luz Rodriguez 557 West 174th Street, Apt.54 New York, NY 10033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,600.00
3.59	Nonpriority creditor's name and mailing address MCKEE FOODS CORPORATION PO BOX 2118 Collegedale, TN 37315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$429.64
3.60	Nonpriority creditor's name and mailing address MELBA UTICA PACKING CO. INC. 1209 Utica Avenue Brooklyn, NY 11203 Date(s) debt was incurred ____ Last 4 digits of account number <u>2016</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,611.46

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3.61	Nonpriority creditor's name and mailing address Mondelez International 100 Deforest Ave East Hanover, NJ 07936 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,900.00
3.62	Nonpriority creditor's name and mailing address NAC FOODS 235-239 Commercial Avenue Palisades Park, NJ 07650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,229.25
3.63	Nonpriority creditor's name and mailing address Natasha ALMONTE 1164 Sheridan Avenue 4C Bronx, NY 10456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$655.21
3.64	Nonpriority creditor's name and mailing address Norman KELLER 166 Bank Street, Apt. 4B New York, NY 10014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Promissory note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,500.00
3.65	Nonpriority creditor's name and mailing address NYC Fire Department Church Street Station PO Box 840 New York, NY 10008 Date(s) debt was incurred ____ Last 4 digits of account number <u>0669</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Inspection Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$152.43
3.66	Nonpriority creditor's name and mailing address Omniel BRENS Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$770.72
3.67	Nonpriority creditor's name and mailing address PLATZER, SWERGOLD, LEVINE, GOL 475 Park Avenue South, 18th Fl New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,966.07

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3.68	Nonpriority creditor's name and mailing address Rafael FERNANDEZ 380 E. 143rd Street, 2I Bronx, NY 10455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
3.69	Nonpriority creditor's name and mailing address RIGS MANAGEMENT CO., LLC 42 Bayview Avenue PO BOX 4200 Manhasset, NY 11030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Landlord</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$113,000.00
3.70	Nonpriority creditor's name and mailing address RJ TRADING OF NY CORP 375 Rider Ave Bronx, NY 10451 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$373.30
3.71	Nonpriority creditor's name and mailing address Roberto ROBLES 1352 St. Nicholas Avenue, Apt. New York, NY 10033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,400.00
3.72	Nonpriority creditor's name and mailing address ROL-ROM FOODS 33 6TH Avenue Paterson, NJ 07542 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,000.00
3.73	Nonpriority creditor's name and mailing address Rosanna Chapman 1132 Southern Blvd Bronx, NY 10459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.00
3.74	Nonpriority creditor's name and mailing address SAFEGUARD CHEMICAL CORPORATION 411 Wales Avenue Bronx, NY 10454 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00

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3.75	Nonpriority creditor's name and mailing address SANITATION SALVAGE CORP. 421 Manida St Bronx, NY 10474 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.76	Nonpriority creditor's name and mailing address SUPERMARKET NEEDS CORP D/B/A Huguenot Sales Co. 1135 Southern Blvd Bronx, NY 10459 Date(s) debt was incurred ____ Last 4 digits of account number <u>2015</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,612.15
3.77	Nonpriority creditor's name and mailing address SWEET RAINBOW CANDY & NUTS 226 S 12th Ave Mount Vernon, NY 10550 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.00
3.78	Nonpriority creditor's name and mailing address TAN ENGINEERING, P.C. 108-18 Queens Boulevard Suite 1A Forest Hills, NY 11375 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.79	Nonpriority creditor's name and mailing address TRAVELERS 9954 Mayland Drive Henrico, VA 23233 Date(s) debt was incurred ____ Last 4 digits of account number <u>3815</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Workers Comp</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,566.00
3.80	Nonpriority creditor's name and mailing address TROPICAL CHEESE INDUSTRIES 450 Fayette Street PO BOX 1357 Perth Amboy, NJ 08862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.81	Nonpriority creditor's name and mailing address TROPICAL EXPRESS, INC. 529 Hunts Point Avenue Bronx, NY 10474 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,899.00

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3.82	Nonpriority creditor's name and mailing address TROPICAL SOURCING LLC 9 Crossbrook Place Livingston, NJ 07039 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00
3.83	Nonpriority creditor's name and mailing address UNITED HEALTH & FOOD CORP 296 Midland Ave Saddle Brook, NJ 07663 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$777.00
3.84	Nonpriority creditor's name and mailing address WEST SIDE FOODS 355 Food Center Drive Bronx, NY 10474 Date(s) debt was incurred ____ Last 4 digits of account number <u>9515</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,205.45
3.85	Nonpriority creditor's name and mailing address WORLDPAY Suite 260 600 Morgan Falls Road Atlanta, GA 30350 Date(s) debt was incurred ____ Last 4 digits of account number <u>1245</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Merchant Processing Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.86	Nonpriority creditor's name and mailing address YNOA CITRUS CORP 1319-1321 43rd St North Bergen, NJ 07047 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Attard & Associates, P.C. 475 Main Street Ste 1F Farmingdale, NY 11735	Line <u>3.76</u> <input type="checkbox"/> Not listed. Explain ____	<u>7615</u>
4.2	Darren Jay Epstein, Esq.,PC 254 South Main Street Suite 406 New City, NY 10956	Line <u>3.60</u> <input type="checkbox"/> Not listed. Explain ____	—

Debtor	Mundo Latino Market Inc.	Case number (if known) _____
	Name	
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?
4.3	Harvey, Scott & St. Charles, L Meadowlands Corporate Center 1099 Wall Street West Lyndhurst, NJ 07071	Line 3.32 <input type="checkbox"/> Not listed. Explain _____
4.4	Michael Alexander CAN CAPITAL 2015 Vaughn Rd Suite 500 Kennesaw, GA 30144	Line 3.11 <input type="checkbox"/> Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 1,031,589.97
5c.	\$ 1,031,589.97

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Stores #1,2,3 and
Basement in the
building known as 590
West 174th Street a/k/a
1272-1278 St. Nicholas
Avenue
13 years**

State the term remaining

List the contract number of any government contract _____

**Rigs Management Co.
c/o Milbrook Properties, Ltd.
Manhasset, NY 11030**

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

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Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

- | | | | | |
|-------|-------------------|--|--------------------------|---|
| 2.1 | Kathryn L. Bedke | 250 West 24th Street, Apt.1-CE
New York, NY 10011 | AMERICAN EXPRESS | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.3</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.2 | Kathryn L. Bedke | 250 West 24th Street, Apt.1-CE
New York, NY 10011 | American Express | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.4</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.3 | Kathryn L. Bedke | 250 West 24th Street, Apt.1-CE
New York, NY 10011 | RIGS MANAGEMENT CO., LLC | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.69</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.4 | Kathryn N. Holler | 8200 Boulevard E, Apt. 23G
North Bergen, NJ 07047 | Ink from Chase | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.39</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.5 | Kathryn N. Holler | 8200 Boulevard E, Apt. 23G
North Bergen, NJ 07047 | RIGS MANAGEMENT CO., LLC | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.69</u>
<input type="checkbox"/> G _____ |

Debtor **Mundo Latino Market Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Kathryn L. Bedke	250 West 24th Street, Apt.1-CE New York, NY 10011	Rigs Management Co.	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
-----	-------------------------	--	--------------------------------	--

2.7	Kathryn N. Holler	8200 Boulevard East, Apt. 11-K North Bergen, NJ 07047	Rigs Management Co.	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
-----	--------------------------	--	--------------------------------	--

Fill in this information to identify the case:

Debtor name Mundo Latino Market Inc.
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

For year before that:
From 1/01/2014 to 12/31/2014

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$-305,752.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address
Relationship to debtor

Dates

Total amount of value

Reasons for payment or transfer

5. Repossessions, foreclosures, and returns

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	West Side Foods Inc. vs. Mundo Latino Market Inc. 304295-2015	Judgment	Supreme Court County of Bronx 851 Grand Concourse #111 Bronx, NY 10451	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Rigs Management Co. LLC vs. Mundo Latino Market 72022/15	Judgment		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Melba Utica Packing Co. Inc. d/b/a Melba Utica Packing Co., vs. Mundo Latino Market Inc. 501870/16	Judgment	Supreme Court NYS, Kings 360 Adams Street Brooklyn, NY 11201	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	Supermarket Needs Corp. vs. Mundo Latino Market Inc. d/b/a El Mundo Latino Market 027276/15	Judgment	Supreme Court NYS County of NY 60 Centre St # 5 New York, NY 10007	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Law Office of Alla Kachan 3099 Coney Island Avenue 3rd Floor Brooklyn, NY 11235		May 11, 2016	\$12,000.00
Email or website address			
Who made the payment, if not debtor? Marjorie-Faith Holler			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial Institution name and
AddressLast 4 digits of
account numberType of account or
instrumentDate account was
closed, sold,
moved, or
transferredLast balance
before closing or
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with
access to it
Address

Description of the contents

Do you still
have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with
access to it

Description of the contents

Do you still
have it?

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title
Case number

Court or agency name and
address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Date of service
From-To

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

Name and address**Date of service
From-To**

26a.1. **JANOVER LLC**
100 Quentin Roosevelt Blvd.
Suite 516
Garden City, NY 11530

2014-2016

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address**If any books of account and records are
unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Kathryn L. Bedke	250 West 24th Street, Apt.1-CE New York, NY 10011	Shareholder	70

Name	Address	Position and nature of any interest	% of interest, if any
Kathryn N. Holler	8200 Boulevard E, Apt. 23G North Bergen, NJ 07047	Shareholder	30

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

Debtor **Mundo Latino Market Inc.**

Case number (if known) _____

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 11, 2016****/s/ Kathryn N. Holler**

Signature of individual signing on behalf of the debtor

Kathryn N. Holler

Printed name

Position or relationship to debtor **president**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Southern District of New York

In re **Mundo Latino Market Inc.**

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>12,000.00</u>
Prior to the filing of this statement I have received	\$	<u>12,000.00</u>
Balance Due	\$	<u>0.00</u>
2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 11, 2016*Date***/s/ Alla Kachan****Alla Kachan 4244281***Signature of Attorney***Law Offices Of Alla Kachan, P.C.****3099 Coney Island Avenue****3rd Floor****Brooklyn, NY 11235****(718) 513-3145 Fax: (347) 342-3156****alla@kachanlaw.com***Name of law firm*

**United States Bankruptcy Court
Southern District of New York**

In re **Mundo Latino Market Inc.**

Debtor(s)

Case No.
Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
---	----------------	----------------------	------------------

-NONE-

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **president** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **May 11, 2016**

Signature **/s/ Kathryn N. Holler**
Kathryn N. Holler

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Southern District of New York**

In re **Mundo Latino Market Inc.** Debtor(s)
Case No. _____
Chapter **11**

VERIFICATION OF CREDITOR MATRIX

I, the president of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **May 11, 2016** **/s/ Kathryn N. Holler**
Kathryn N. Holler/president
Signer/Title

458 ½ SOUTH BROADWAY MEAT INC.
458 1/2 S BROADWAY
YONKERS, NY 10705

A&A DISTRIBUTORS
717 PENNSYLVANIA AVE
LINDEN, NJ 07036

AMERICAN EXPRESS
PO BOX 1270
NEWARK, NJ 07101

AMERICAN EXPRESS
P.O. BOX 1270
NEWARK, NJ 07101

ASCENTIUM CAPITAL LLC
PO BOX 301593
DALLAS, TX 75303

ATTARD & ASSOCIATES, P.C.
475 MAIN STREET
STE 1F
FARMINGDALE, NY 11735

BEHALF
RA'ANANA, HAHAROSHET ST 25
ISRAEL

BEST SNACKS CORP
100-06 93RD AVENUE
RICHMOND HILL, NY 11418

BIMBO FOODS, INC.
255 BUSINESS CENTER DR
HORSHAM, PA 19044

BROADVIEW NETWORKS
800 WESTCHESTER AVE.
PORT CHESTER, NY 10573

C&C SIGNS
1275 EDWARD L. GRANT HWY
BRONX, NY 10452

CAMERINO ALMONTE
1011 SHERIDAN AVENUE, APT.5-A
BRONX, NY 10456

CAN CAPITAL
2015 VAUGHN ROAD, BUILDING 500
KENNESAW, GA 30144

CAROLYN COAKLEY
6043 19 MILE ROAD
STERLING HEIGHTS, MI 48314

CASH REGISTER SYSTEMS INC
2906 RT 130 NORTH
RIVERSIDE, NJ 08075

CASHLINE ATM
41 GOLD STREET
VALLEY STREAM, NY 11580

CIBAO MEAT PRODUCTS INC.
630 ST ANN'S AVE
BRONX, NY 10455

CINTAS
PO BOX 1474
CULPEPER, VA 22701

CONCHITA FOODS, INC.
10051 NW 99TH AVENUE # 3
MIAMI, FL 33178

CONSTELLATION NEW ENERGY, INC.
14217 COLLECTIONS CENTRE DR.
CHICAGO, IL 60693

CONSTELLATION NWENERGY, INC.
14217 COLLECTIONS CENTER DR.
CHICAGO, IL 60693

COSMO PROVISION CO, INC.
12 THERESA LN
HARRISON, NY 10528

D'BOIS ICE CREAM
26423 GRAND CENTRAL PARKWAY
LITTLE NECK, NY 11362

DARREN JAY EPSTEIN, ESQ., PC
254 SOUTH MAIN STREET
SUITE 406
NEW CITY, NY 10956

DIAZ FOODS
C/O ALLEN MAXWELL & SILVER INC
190 SYLVAN AVENUE
ENGLEWOOD CLIFFS, NJ 07632

EDDIE PAGAN/EP SECURITY SYSTEM
35 HILLSIDE AVE
NEW YORK, NY 10040

EL FARO BAKERY, INC.
3124 FULTON ST.
BROOKLYN, NY 11233

EL PANADERO
1380 ST NICHOLAS AVE
NEW YORK, NY 10033

EUROPEAN BEAUTY CONCEPTS
143 WOODWORTH AVE.
YONKERS, NY 10701

F&J MASTER SALES
940 E 149TH STREET
BRONX, NY 10455

FARMLAND FRESH DAIRIES, LLC
105-03 150TH STREET
JAMAICA, NY 11435

FELIXTAVERAS
559 WEST 172ND STREET
NEW YORK, NY 10032

FERNANDO SANTOS

FERNANDO'S BAKERY
5 SHERMAN ST
LINDEN, NJ 07036

G CONSULTING
6 TRANSVERSE ROAD
GARDEN CITY, NY 11530

GENERAL TRADING CO., INC
455 18TH STREET
CARLSTADT, NJ 07072

GIOVANNI RODRIGUEZ
8200 BOULEVARD EAST, APT. 17-K
NORTH BERGEN, NJ 07047

GLENNYS MORALES
191 AUDUBON AVENUE
APT. 3B
NEW YORK, NY 10033

GOYA FOODS, INC.
100 SEAVIEW DRIVE
SECAUCUS, NJ 07096

GRACEKENNEDY FOODS (USA) LLC -
230 MOONACHIE AVENUE
MOONACHIE, NJ 07074

GURU NETWORKS
6 N. PEARL STREET, SUITE 304C
PORT CHESTER, NY 10573

HARVEY, SCOTT & ST. CHARLES, L
MEADOWLANDS CORPORATE CENTER
1099 WALL STREET WEST
LYNDHURST, NJ 07071

IMPERIAL BAG & PAPER CO
255 ROUTE 1 & 9
JERSEY CITY, NJ 07306

INK FROM CHASE
PO BOX 15123
WILMINGTON, DE 19850

IOS NATURALS, LLC
4 HICKORY ROAD
WEST ORANGE, NJ 07052

J ESPOSITO & SONS
1328 39TH ST
BROOKLYN, NY 11218

J&J FARMS CREAMERY CO., INC
57-48 49TH PLACE
MASPETH, NY 11378

JACK'S EGGS
130 44TH ST
BROOKLYN, NY 11232

JANOVER LLC
100 QUENTIN ROOSEVELT BLVD.
SUITE 516
GARDEN CITY, NY 11530

JEFFREY PEREZ
172 SHERMAN AVENUE
APT. 36
NEW YORK, NY 10034

JEFFREY PEREZ
172 SHERMAN AVENUE
APT. 36
NEW YORK, NY 10034

JJCR ENTERPRISES LLC
17 GRAND AVENUE
RIVER EDGE, NJ 07661

JOSE SANCHEZ
WEST 590 W. 174 STREET, APT.#
NEW YORK, NY 10033

JOSEPHINA BAEZ DE VALDEZ

JPMORGAN CHASE BANK, N.A.
PO BOX 659754
SAN ANTONIO, TX 78265

JPMORGAN CHASE BANK, N.A.
PO BOX 659754
SAN ANTONIO, TX 78265-9754

JUAN BAEZ
185 AUDUBON AVENUE
APT. 25
NEW YORK, NY 10033

JUAN BURGOS
274 W 140 ST
APT. 46
NEW YORK, NY 10030

JUAN ROJAS
503 WEST 169TH STREET
APT.42
NEW YORK, NY 10032

KATHRYN L. BEDKE
250 WEST 24TH STREET, APT.1-CE
NEW YORK, NY 10011

KATHRYN L. BEDKE
250 WEST 24TH STREET, APT.1-CE
NEW YORK, NY 10011

KATHRYN L. BEDKE
250 WEST 24TH STREET, APT.1-CE
NEW YORK, NY 10011

KATHRYN N. HOLLER
8200 BOULEVARD E, APT. 23G
NORTH BERGEN, NJ 07047

KATHRYN N. HOLLER
8200 BOULEVARD E, APT. 23G
NORTH BERGEN, NJ 07047

KATZMAN PRODUCE
153-157 NYC TERMINAL MARKET
BRONX, NY 10474

LATIN AMERICAN DISTRIBUTORS IN
307 INDUSTRIAL WAY W
EATONTOWN, NJ 07799

LAWRENCE MITCHELL
229 WEST 60TH STREET
NEW YORK, NY 10023

LUZ RODRIGUEZ
557 WEST 174TH STREET, APT.54
NEW YORK, NY 10033

MCKEE FOODS CORPORATION
PO BOX 2118
COLLEGEDALE, TN 37315

MELBA UTICA PACKING CO. INC.
1209 UTICA AVENUE
BROOKLYN, NY 11203

MICHAEL ALEXANDER
CAN CAPITAL
2015 VAUGHN RD SUITE 500
KENNESAW, GA 30144

MONDELEZ INTERNATIONAL
100 DEFOREST AVE
EAST HANOVER, NJ 07936

NAC FOODS
235-239 COMMERCIAL AVENUE
PALISADES PARK, NJ 07650

NATASHA ALMONTE
1164 SHERIDAN AVENUE
4C
BRONX, NY 10456

NORMAN KELLER
166 BANK STREET, APT. 4B
NEW YORK, NY 10014

NYC FIRE DEPARTMENT
CHURCH STREET STATION
PO BOX 840
NEW YORK, NY 10008

OMNIEL BRENS

PLATZER, SWERGOLD, LEVINE, GOL
475 PARK AVENUE SOUTH, 18TH FL
NEW YORK, NY 10016

RAFAEL FERNANDEZ
380 E. 143RD STREET, 2I
BRONX, NY 10455

RIGS MANAGEMENT CO.
C/O MILBROOK PROPERTIES, LTD.
MANHASSET, NY 11030

RIGS MANAGEMENT CO., LLC
42 BAYVIEW AVENUE
PO BOX 4200
MANHASSET, NY 11030

RJ TRADING OF NY CORP
375 RIDER AVE
BRONX, NY 10451

ROBERTO ROBLES
1352 ST. NICHOLAS AVENUE, APT.
NEW YORK, NY 10033

ROL-ROM FOODS
33 6TH AVENUE
PATERSON, NJ 07542

ROSANNA CHAPMAN
1132 SOUTHERN BLVD
BRONX, NY 10459

SAFEGUARD CHEMICAL CORPORATION
411 WALES AVENUE
BRONX, NY 10454

SANITATION SALVAGE CORP.
421 MANIDA ST
BRONX, NY 10474

SUPERMARKET NEEDS CORP
D/B/A HUGUENOT SALES CO.
1135 SOUTHERN BLVD
BRONX, NY 10459

SWEET RAINBOW CANDY & NUTS
226 S 12TH AVE
MOUNT VERNON, NY 10550

TAN ENGINEERING, P.C.
108-18 QUEENS BOULEVARD
SUITE 1A
FOREST HILLS, NY 11375

TRAVELERS
9954 MAYLAND DRIVE
HENRICO, VA 23233

TROPICAL CHEESE INDUSTRIES
450 FAYETTE STREET
PO BOX 1357
PERTH AMBOY, NJ 08862

TROPICAL EXPRESS, INC.
529 HUNTS POINT AVENUE
BRONX, NY 10474

TROPICAL SOURCING LLC
9 CROSSBROOK PLACE
LIVINGSTON, NJ 07039

UNITED HEALTH & FOOD CORP
296 MIDLAND AVE
SADDLE BROOK, NJ 07663

WEST SIDE FOODS
355 FOOD CENTER DRIVE
BRONX, NY 10474

WORLDPAY
SUITE 260
600 MORGAN FALLS ROAD
ATLANTA, GA 30350

YNOA CITRUS CORP
1319-1321 43RD ST
NORTH BERGEN, NJ 07047

**United States Bankruptcy Court
Southern District of New York**

In re **Mundo Latino Market Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Mundo Latino Market Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

May 11, 2016

Date

/s/ Alla Kachan

Alla Kachan 4244281

Signature of Attorney or Litigant
Counsel for **Mundo Latino Market Inc.**
Law Offices Of Alla Kachan, P.C.

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